	CLAIMS ONLY		Application Number	Filing Date
			10/163977	
			Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1	1						51							
2		1					52							
3		1					53							
4		1					54							
5		1					55							
6		1					56							
7	1						57							
8		1					58							
9	1						59							
10		1					60							
11							61							
12							62							
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42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep	3						Total Indep							
Total Depend	7						Total Depend							
Total Claims	10						Total Claims							